

\_\_\_\_\_

Prenell Jones 8/17/07  
(Assistant Examiner) (Date)

**Total Claims Allowed:** ~~34~~ 31

O.G.  
Print Claim(s)

O.G.  
Print Fig.  
4A

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant						<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47									
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original				
1	1			<del>31</del>			61			91			121				181
2	2		<del>27</del>	32			62			92			122				182
3	3		<del>28</del>	33			63			93			123				183
4	4		<del>29</del>	34			64			94			124				184
5	5		<del>30</del>	35			65			95			125				185
6	6		<del>31</del>	36			66			96			126				186
7	7			<del>37</del>			67			97			127				187
8	8			38			68			98			128				188
9	9			39			69			99			129				189
10	10			40			70			100			130				190
11	11			41			71			101			131				191
12	12			42			72			102			132				192
13	13			43			73			103			133				193
	<del>14</del>			44			74			104			134				194
14	15			45			75			105			135				195
15	16			46			76			106			136				196
	<del>17</del>			47			77			107			137				197
16	18			48			78			108			138				198
17	19			49			79			109			139				199
18	20			50			80			110			140				200
19	21			51			81			111			141				201
20	22			52			82			112			142				202
21	23			53			83			113			143				203
22	24			54			84			114			144				204
23	25			55			85			115			145				205
24	26			56			86			116			146				206
	<del>27</del>			57			87			117			147				207
	<del>28</del>			58			88			118			148				208
<del>25</del>	29			59			89			119			149				209
<del>26</del>	30			60			90			120			150				210